

- NorthWest Washington Area Indian Health Board
- Northwest Portland Area Indian Health Board
- Sisseton-Wahpeton Oyate
- Great Plains Tribal Chairman's Health Board
- Oglala Sioux
- Northern Native American Health Alliance
- Fond du Lac Band of Lake Superior Chippewa
- Menominee
- Oneida Tribe of Indians of Wisconsin
- Ho-Chunk

## Indian Health Service Tribal Injury Prevention Cooperative Agreements Program Newsletter

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## Welcome

Welcome to the first issue the 2010-2015 funding cycle of the Indian Health Service (IHS) Tribal Injury Prevention Cooperative Agreements Program (TIPCAP). Please forward this PDF file to your Tribe's leaders and program partners. We look forward to receiving 'Notes from the Field' in future editions of the newsletter.

## Note from Nancy Bill

A warm greeting all TIPCAP sites and IHS project officers! I am truly pleased to welcome all the new IP Coordinators and IHS project officers joining the TIPCAP group. The new cadre of coordinators and project officers can only add to the richness of what TIPCAP has to offer. You will find this journey to be very empowering and rewarding. The IHS Injury Prevention program seeks to improve, collaborate and create new partnerships across disciplines in injury prevention.



Nancy Bill, MPH, CHES,  
IHS Injury Prevention  
Manager

A series of upcoming WebEx and teleconference calls, hosted by IHS, will provide guidance for motor vehicle and unintentional fall prevention. The calls will address application of effective strategies and approaches unique to our communities. The experienced TIPCAP coordinators and project officers can share their success, challenges, and lessons learned. For example, coordinator Shannon White (TIPCAP Sisseton-Wahpeton Oyate Tribal Coordinator) has seen successes in working with law enforcement and the community, and from her experiences, we can all learn powerful messages.

Lisa Aguerro (TIPCAP Quechan Indian Tribe Coordinator) is another example project with a comprehensive fall prevention program model (clinical, exercise, home assessments) that have been a national Injury Prevention training site for IHS. There are many TIPCAP programs that can share valuable lessons to help guide us in addressing issues of motor vehicle and unintentional fall prevention. The aim is to enhance strategies by engaging tribal communities in building sustainable programs to ensure success.

Lastly, as we approach the holiday seasons, I would like to draw attention to the important topic of drunk driving. NHTSA reports that it is against the law in all US States and DC to drive with a BAC of .08 or higher. In 2009, 10,839 people were killed in alcohol-impaired driving crashes, including 753 in December alone. In 2009, of all the motor vehicle fatalities among children ages 14 and younger, 14 percent occurred in alcohol-impaired-driving crashes. Law enforcement is a key IP partner in this strategy to keeping our roadways safe. National campaigns that target DUI such as **Don't Shatter the Dream, Don't Drink and Drive** or **Drunk Driving Over the Limit Under Arrest** are important to be involved in to provide support from injury prevention programs. I have confidence that as we apply effective strategies for motor vehicle injury prevention programs, we will be able to achieve safer communities.

As we end this year of 2010, I would like to share my gratitude to everyone for your commitment to injury prevention. Every action you take will be an important step to making a difference for a safer future to end the injury disparities in our communities, villages, and pueblos. Enjoy a very safe, peaceful and joyful holiday season!

*Ahe'hee* (thank you!) **Nancy Bill**

## TIPCAP HANDBOOK

Prior to and immediately following the TIPCAP conference call held December 14, 2010, Nancy provided an electronic copy of the **2010-2015 TIPCAP Handbook**. The Handbook was developed to answer basic questions about TIPCAP, including descriptions of administrative requirements, roles/responsibilities, and resources available to support your TIPCAP project. If you did not receive and/or could not access the file provided, please contact Nancy Bill (301-443-0105 or [Nancy.Bill@ihs.gov](mailto:Nancy.Bill@ihs.gov)).

## WEBEX TELECONFERENCES

Nancy Bill plans to conduct regular Webex/Phone teleconference calls for all TIPCAP Coordinators, staff, and IHS Project Officers. The next call has been scheduled for January 25, 2010 at 3:00 pm EST. Nancy will email call-in information prior to the call.

## TIPCAP ADVISORY COMMITTEE NOMINATIONS NOW BEING ACCEPTED

As announced previously, IHS Headquarters is forming a TIPCAP Advisory Committee to provide input for the 2010-2015 TIPCAP funding cycle. The committee will be comprised of TIPCAP Coordinators, who will serve one-year terms.

This committee will began work immediately with conference calls and one face-to-face meeting. The first task will be to develop the agenda for the April 13-14, 2011 annual meeting in Washington, DC.

- What: TIPCAP Advisory Committee
- How much time will it take? Up to one year with regular conf calls & one face-to-face meeting on Advisory Committee
- Who can apply? TIPCAP Coordinators
- What is the purpose of the committee? To provide guidance for IHS on TIPCAP issues to foster communication and increase participation to ensure capacity building and sustainability of programs.
- How will I benefit? You will have an active voice and participation to help drive the program. Committee members will receive additional training in areas of leadership, social marketing, advocacy, etc.
- Can I remain on for more than one year? Possible extension of terms up to the five years.

To be considered for the committee, please submit your name and brief paragraph on your background by January 12, 2011 to Nancy Bill ([Nancy.Bill@ihs.gov](mailto:Nancy.Bill@ihs.gov)).

## CDC Webinars

Holly Billie from the Centers for Disease Control & Prevention (CDC) National Center for Injury Prevention & Control (NCIPC) would like to add TIPCAP Coordinators and Project Officers to an email distribution list for those interested in participating in CDC-sponsored Webinars. Planned 2011 webinar topics include: Ignition Interlocks; Older Adult Fall Prevention; and Suicide Prevention. Please email Holly Billie ([hbillie@cdc.gov](mailto:hbillie@cdc.gov)) to be added to the webinar announcement list.

## Progress Reporting

As announced by Andrew Diggs and Nancy Bill during the 12/14/10 TIPCAP conference call, all TIPCAP awardees have **semi-annual progress reporting requirements**, even if a sites' Notice of Award (NOA) stated annual reporting. The first semi-annual report is due March 31, 2011. Coordinators should highlight activities occurring from September 1, 2010 to February 28, 2011 in the report. IHS Headquarters will provide a template to help TIPCAP coordinators write and submit progress reports. This template may request additional information than what is described on page 7 of the TIPCAP Handbook. Progress reports may be submitted via email. Rather than waiting until mid-year, Coordinators are encouraged to regularly maintain a file to document progress. In addition, please refer to the 2010-2015 TIPCAP Handbook for more information/tips about Progress Reporting.



## Save The Date – 2011 TIPCAP Workshop

The first annual TIPCAP workshop of the 2010-2015 TIPCAP funding cycle will be held in **Washington, DC, on April 13-14, 2011**. During future TIPCAP conference calls, Nancy will provide additional information about the workshop, including information regarding hotel reservations. All TIPCAP Coordinators are required to attend this annual meeting/workshop. For any TIPCAP site that has a Coordinator vacancy, a designee from the Tribe should be identified to attend. Immediately prior to the 2011 workshop, a one-day Project Officer-only workshop will be held on April 12, 2011. **Please mark your calendars to be in DC in Spring 2011!**



## IHS IP Epidemiology Fellowship

The IHS Injury Prevention Program is pleased to announce the selection of 15 injury prevention practitioners to the **2011-2010 IHS Injury Prevention Epidemiology Fellowship Program**. The Fellowship is a 12-month advanced learning experience for individuals promoting injury prevention in American Indian/Alaska Native communities. The accepted applicants for the 2011 Fellowship include at least one TIPCAP Coordinator and

four IHS project officers. Also included is one former TIPCAP coordinator and at least two project officers. The first class will be held at CDC in Atlanta, GA hosted by Holly Billie. The fifteen new fellows include:

1. **Hillary Strayer**, Senior IP Specialist, Alaska Area (TIPCAP PO)
2. **Bryan Reed**, EH Director, Bristol Bay Health Corp, Alaska Area
3. **Tim Balderrama**, SU Sanitarian, Aberdeen Area
4. **Charles Mack**, Environmental Health Officer, Aberdeen Area
5. **Shannon White-Thompson**, IP Program Manager, Sisseton Wahpeton Oyate of Lake Traverse Tribe, Aberdeen Area (TIPCAP Coordinator)
6. **Martin Stevens**, SU Sanitarian, Aberdeen Area (former TIPCAP PO)
7. **Helen Sisneros**, Outreach Services Specialist, Albuquerque Area (former TIPCAP Coordinator)
8. **Lisa Nakagawa**, Area IP Specialist, California Area (TIPCAP PO)
9. **Delores Becenti**, District IP Specialist, Navajo Area
10. **Jacey McCurtain**, Environmental Health Officer, Navajo Area
11. **Dustin Joplin**, Environmental Health Officer, Oklahoma Area (TIPCAP PO)
12. **Molly Madson**, Environmental Health Officer, Phoenix Area
13. **Jason Hymer**, District IP Specialist, Phoenix Area (TIPCAP PO)
14. **David Bates**, Environmental Health Officer, Phoenix Area
15. **Travis Bower**, Sanitarian, Tucson Area

The five Fellowship academic course sessions include:

1. Injury prevention project development: CDC, Atlanta, Georgia; May 9-13, 2011
2. University of Michigan Summer Epidemiology Courses, Ann Arbor: July 2011 (3 weeks)
3. Injury prevention field work: Fall or Winter 2011 (one week).
4. Scientific presentation skills: Albuquerque: February 2012 (one week)
5. Symposium: Rockville, MD, May 2012 (2 days)

## Notes from the Field

### IHS Bemidji Area TIPCAP Site Visits

*Submitted by Nancy Bill, IHS Headquarters*

On October 20-21, 2010, I made a site visit to the IHS Bemidji Area to meet the new TIPCAP sites and travel to the Bad River Band of the Lake Superior Tribe of Chippewa Indians. This site visit served to as an opportunity to "meet and greet" with TIPCAP sites and exchange information to foster IHS technical support.

On day one, I met in Duluth, MN with two new TIPCAP coordinators and administrators from **Ho-Chunk Nation** and **Menominee Indian Tribe of Wisconsin**, as well as staff from previously funded TIPCAP sites from the

**Oneida Tribe of Indians of Wisconsin**, and **Fond du Lac Band of Lake Superior Chippewa**. The meeting provided discussion on key issues of TIPCAP administrative and program elements. The recently completed final draft of the *TIPCAP Handbook* was distributed to visit participants. The sites were encouraged to provide feedback on the handbook to help ensure clarity and applicability.

On day two of my visit, I had an early start with a drive from Duluth, MN to Odanah, WI where I met IHS Bemidji Area EHHS, OEHE Chief **Diana Kuklinski**, District Environmental Health Officer **Casey Crump**, and TIPCAP Coordinator **Luis Salas**. The first site visit activity included a visit to a very well attended community Domestic Violence conference, which opened with a traditional prayer and drum group. We then met with Tribal Chairman Mr. Michael Wiggins, followed by a meeting with Mary Bigboy, Community Health Director and several key partners invited by Luis. Each individual described their collaboration and support for the Bad River's IP program. We had lunch with Roxanna Turner and Joe Corbine from the Ashland High School, where both serve as leads in the Creating Caring Community (CCC) anti-bullying school program. The CCC program was initiated several years to address issues of bullying. The visit also included a stop at Ashland, WI High School, where the school principal and teachers provided more insight on CCC, including a brief tour of the school. The school displays "Caught Caring" bricks that filled one hallway of the building. Every time a student is 'caught' doing a positive act of caring, their name is submitted to be posted on a paper brick. This is one activity among others that CCC promotes in support of positive behavior recognition of students. CCC is having a very positive effect on the school environment. Ongoing evaluation is in process to measure the impact on student's attitudes and behaviors since the inception of the program.



**Photo (l to r):**  
Diana Kuklinski,  
Chairman  
Michael  
Wiggins, Jr.,  
Nancy Bill,  
and Luis Salas.

This site visit was my first to the IHS Bemidji Area. I know site visits can make a profound difference in understanding needs and issues; more so than simply reading a TIPCAP site's progress reports. This was true of this visit as I learned and listened to all. Although this was a very short visit, I found everyone to be very genuine, and scenery of awesome beauty. I plan to make a future visit to the Aberdeen Area in early 2011. Site visits to areas will be contingent on funding and schedules. Thank you to Diana Kuklinski, Luis Salas, and Casey Crump for guiding me on the Bemidji visit.



## **T** Training Opportunities/Conferences

### **San Diego International Conference on Child and Family Maltreatment**

*January 22-28, 2011; San Diego, CA*

The San Diego Conference focuses on multidisciplinary best-practice efforts to prevent, if possible, or otherwise to investigate, treat, and prosecute child and family maltreatment. For more information, visit: <http://www.sandiegoconference.org>.

### **International Meeting on Indigenous Child Health**

*March 4-6, 2011; Vancouver, British Columbia*

Join with the Canadian Pediatric Society and the American Academy of Pediatrics, collaborating with the Indian Health Service, US Department of Health and Human Services, and the First National Inuit Branch, Health Canada, for the 4th International Meeting on Indigenous Child Health. We invite all health care providers and researchers who work with children, youth and families in American Indian, Alaska Native, First Nations, Inuit, and Métis communities to share model programs and research, learn about prevalent health problems, and acquire practical skills for use in community settings. For more information, visit: <http://www.aap.org/nach/>.

### **10th Annual Native Women's & Men's Wellness Conference**

*March 27-31, 2011; Albuquerque, NM*

This annual event is the largest comprehensive wellness conference for Native and Indigenous people throughout North America. The 10th Annual conference, sponsored by the American Indian Institute (All), is entitled "Healing Connections – Mind, Body, Spirit, Community." The conference aims to provide personal and professional development, as well as activities to inform and inspire tribal community leaders, health advocates, and health consumers in best practices. For more information, visit: <http://aii.ou.edu/conferencetrainings/native-women-mens/>.

### **Violence Against Women: Complex Realities and New Issues in a Changing World**

*May 29-June 1, 2011; Montreal, Quebec (Canada)*

The Second International Conference on Violence Against Women will offer an opportunity for dialogue, reflection, and debate on topics in three main categories: theoretical models, violence, and social responses. The conference is organized by the Interdisciplinary Research Center on Family Violence and Violence Against Women. For more information, visit: <http://www.conferenceviolence.com>.

### **Principles and Practice of Injury Prevention and Evaluating Injury Prevention Programs & Policies The Johns Hopkins Center for Injury Research & Policy Summer Institutes**

*June 12-15, 2011 & June 16-17, 2011; Baltimore, MD*

The Johns Hopkins Center for Injury Research & Policy will hold the following two Summer Institutes in 2011 in Baltimore, MD: 1) Principles and Practice of Injury Prevention, June 12-15, 2011. This is an intensive, competency based course designed to enhance participants' knowledge and skills in injury and violence prevention; 2) Beyond the Basics: Evaluating Injury Prevention Programs & Policies, June 16-17, 2011. This course will focus on intermediate skills needed for evaluating injury prevention programs and policies. This course may be combined with Principles and Practice of Injury Prevention or taken alone. For more information, visit the following website: [http://www.jhsph.edu/injurycenter/training/summer\\_institute/](http://www.jhsph.edu/injurycenter/training/summer_institute/).

DID YOU KNOW

EVERY DAY 16,000  
PEOPLE IN THE  
WORLD DIE FROM  
INJURIES

## **F**unding Opportunities

### **Drive 2 Life Distracted Driving Public Service Announcement Contest**

#### **National Organization for Youth Safety (NOYS)**

*Application Deadline (Rolling): February 7, 2011*

Drive 2 Life is looking for the best ideas for public service announcements (PSAs), conceived by youth, and aimed at youth, to alert them to the dangers of distracted driving. The contest is open to anyone in the U.S. between ages 13-22. To enter the contest, participants must complete an official entry form; entries will be divided into two age categories: ages 13-16, and ages 17-22. Group entries will not be accepted. Each entrant will create a PSA script that addresses distracted driving and use a provided camcorder to simulate an idea into a 15-30 second PSA. In each age category, the winning concept will be professionally produced and nationally broadcast, and the winner will receive \$1,000, plus an expense-paid trip to New York; five runners-up will receive \$500. For more information about the Drive 2 Life PSA contest, visit: <http://www.drive2life.org/contest.html>. For more information about distracted driving, visit: <http://www.distraction.gov> or <http://www.nhtsa.gov>.

### **National Youth Traffic Safety Month School Distracted Driving Contest -- Act Out Loud/National Youth Traffic Safety Month & National Organization for Youth Safety (NOYS)**

*Application Deadline (Rolling): April 11, 2011*

National Youth Traffic Safety Month is held each May to encourage teen safe driving projects prior to prom, graduation and summer – the deadliest season for America's youth. Act Out Loud, part of National Youth Traffic Safety Month, is a national, teen-led and school-based activism competition to help spread the word about safe teen driving and encourage youth to make a difference in their communities. To enter the competition, a team of one advisor and two students sign-up to receive a toolkit and agree to complete a distracted driving project. All teams that sign-up will receive the

electronic promotion toolkit and electronic communication throughout the school year; only one team per school is permitted to enter. Teams will participate in monthly webinars to assist in creating an implementation video (due May 6<sup>th</sup>). Videos will show how the team addressed distracted driving; involved the community; partnered with a community leader; and promoted National Youth Traffic Safety Month and the National Organization for Youth Safety (NOYS). Submissions will be accepted until April 11, 2011. Beginning April 11, the first 200 teams that submit project videos will be awarded \$200. The top five teams will receive \$5,000 each, and the grand prize winner will receive \$10,000. For more information about Act Out Loud or Safety Month contest, visit the following websites: <http://www.actoutloud.org/> <http://actoutloud.org/contestInfo.asp>. For more information about NOYS, visit: <http://www.noys.org/>.

## Resources

The following resources are organized by category, including: **traffic safety; intentional injury; poisoning safety, home safety, data, and other.** If weblinks provided are incorrect or no longer in use, we suggest you conduct a search on the web using the resource title as your search phrase.

### Traffic Safety

#### Motor Vehicle Safety Educational Materials

<http://www.powwowdownbuckleup.com/>

This is a website developed by Lynn Hart, Yankton Sioux, and offers materials for traffic safety, occupant restraint and DUI messages for tribal communities. The website's goal is to help promote a safe environment by reminding everyone in Indian Country of creative ways to promote seat belt safety on your Reservation. Safety slogans include: **24-7-365 Buckle Up Before You Drive! and I'm A SKIN That Buckles In.** To order products, call Lynn Hart at 605-491-4598 or email ([lynnhart@noxcusesnone.com](mailto:lynnhart@noxcusesnone.com)).

#### Illinois Department of Transportation Study Indicates Importance of Seatbelts for Rear Seat Passengers

*WIFR Television (November 15, 2010)*

The Illinois Department of Transportation just released a 6-year study showing how important seat belts are for back seat passengers. The report says that passengers killed in car accidents are twice as likely as front seat riders to not be wearing a belt. For example, last year, only 12 percent of back seat passengers killed in an accident were buckled in. To view the article, visit: <http://www.wifr.com/mobi?storyid=107794944>.

#### New Study and Resources Highlight Teen Driving Data, Risks, and Steps for Prevention Centers for Disease Control and Prevention (CDC)

Learning to drive is often considered a rite of passage for teenagers. However, the reward of being a new

driver comes with real risk. Car crashes are the leading cause of death for teens in the United States, taking the lives of eight teens each day. CDC published a new MMWR entitled, *Drivers aged 16 or 17 years involved in fatal crashes--United States, 2004-2008*. It shows that the annual number of 16 and 17 year-old drivers involved in fatal crashes decreased by 36 percent from 2004-2008. The study states that graduated driver licensing (GDL) laws, or teen driving laws, exist in 49 states can be credited at least in part for the reduction in death rates. These laws limit high risk conditions for newly-licensed drivers, such as driving at night and transporting other teen passengers. Because one out of every three teen deaths is the result of a motor vehicle crash, further strategies are essential for reducing teen crashes and related injuries. CDC's new "Parents Are the Key" campaign and "Policy Impact: Teen Driver Safety" issue brief can help parents, policymakers, and others take steps to save more young lives. For more information, and to access these publications, visit: <http://www.cdc.gov/injury/pdfs/InjuryCenterConnection-Fall2010-a.pdf>.

#### Assessing the residual teen crash risk factors after graduated drivers license implementation

*Annals of Advances in Automotive Medicine 2010; 54: 295-308*

Graduated driving licensing laws are now in place in all 50 U.S. states and the District of Columbia. However, despite stricter supervised driving requirements, restrictions on the number of passengers, and earlier nighttime driving curfews, teen drivers continue to be at a higher crash risk than the adult driving population. The National Motor Vehicle Crash Causation Survey (NMVCCS) dataset was examined to compare and contrast the primary crash factors for teen drivers (16-18) and adult drivers (35-55) in the GDL era. It was found that teen drivers were 2.40 times more likely to be in a control loss crash and 1.88 times more likely to be in a road departure crash relative adult drivers. Furthermore, teen drivers who were in a crash were 1.73 times more likely to be distracted, 1.83 times more likely to be driving inappropriately, and 1.47 times more likely to be inadequately aware of their driving environment than adults. Passengers and aggressive driving also contributed significantly to the heightened crash risk for teen drivers, after GDL implementation. This study emphasizes that while the number of teen crashes has decreased with GDL, the relative crash risk for certain experience related causative factors and pre-crash scenarios remain high for teen drivers after GDL implementation nationwide. For more information, visit: [http://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle\\_224821\\_33](http://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle_224821_33).

#### Best states for teen drivers: U.S. News rankings

*U.S. News & World Report (September 17, 2010)*

These first-ever rankings of states' teen driving safety found a wide disparity in the driving conditions and safety

laws young drivers face in different parts of the nation. U.S. News examined 11 factors that affect teen driving safety, ranging from teen driver fatalities to laws regarding how quickly teens are able to earn unrestricted driving privileges to the average number of miles residents drive within the state. The District of Columbia topped the list by having some of the most rigorous laws in the country: governing driver's license requirements for teens; banning text messaging for all drivers; and using automated traffic cameras to curtail speeding. The rest of the top ten were: California, Colorado, Maryland, Illinois, New Jersey, Oregon, Minnesota, Utah, and Washington. South Dakota, at the bottom of the list, allows teenagers to drive at age 14 and has some of the nation's more lax laws regarding driving while intoxicated or distracted. To view the complete article, visit the following website: <http://www.usnews.com/news/teen-driving>.

## **One in Three Fatally Injured Drivers Tested Positive for Drugs (Press Release – November 30, 2010)**

*Office of National Drug Control Policy (ONDCP)*

Gil Kerlikowske, Director of the Office of National Drug Control Policy (ONDCP), has called attention to the alarmingly high percentage of fatalities on our Nation's roadways involving drivers that had drugs in their system and called on communities to act immediately to prevent drug use before it starts in light of a new traffic fatality analysis released by the National Highway Transportation Safety Administration (NHTSA). While national data focusing on the danger of driving under the influence of alcohol is readily available and often cited, less is known or discussed about drivers under the influence of other drugs.

According to the first-ever analysis of drug involvement from NHTSA's Fatal Accident Reporting System (FARS) census, one in three motor vehicle fatalities (33 percent) with known drug test results tested positive for drugs in 2009. Additionally, the involvement of drugs in fatal crashes has increased by five percent over the past five years, even as the overall number of drivers killed in motor vehicle crashes in the United States has declined. "Drugged driving is a much bigger public health threat than most Americans realize and unfortunately, it may be getting worse," said Director Kerlikowske. "It is critical that communities across the Nation address the threat of drugged driving as we redouble our efforts to make America's roadways safer by increasing public awareness, employing more targeted enforcement, and developing better tools to detect the presence of drugs among drivers." To view the press release, visit: <http://www.whitehousedrugpolicy.gov/news/press10/113010.html>. For more information about ONDCP, visit: <http://www.whitehousedrugpolicy.gov/>. To download more information on drugged driving, including resources parents and communities can use to prevent drugged driving among youth, visit: <http://www.TheAntiDrug.com>.

## **Engaging Youth in Addressing Drugged Driving (12/07/10)**

*Office of National Drug Control Policy (ONDCP)*

The issue of drugged driving must no longer take a "back seat" in our efforts to address teen traffic safety; drugs and driving may be a bigger problem than generally recognized. A *New England Journal of Medicine* report on drivers without alcohol in their systems who were stopped by police for reckless driving and tested for the presence of marijuana or cocaine found that 33% tested positive for marijuana, 13% tested positive for cocaine, and 12% tested positive for both. According to ONDCP Director Gil Kerlikowske, on a typical "Friday or Saturday evening about 16 percent of the vehicles - one in six of the cars - (the driver) will be under the influence of an illicit or licit drug." With Friday night football games, homecoming events, and winter activities, those are times youth are typically on the road. A nationally representative survey by the National Highway Traffic Safety Administration (NHTSA) found that in 2007, 16 percent of weekend nighttime drivers (roughly 1 in 6) tested positive for licit or illicit drugs. Moreover, approximately 1 in ten high school seniors responding to the 2008 *Monitoring The Future* study reported driving after smoking marijuana within two weeks prior to the study interview. Young drivers are particularly at risk for being impacted by drugged driving as supported by data on youth behaviors. Nearly one quarter (23.2%) of high school seniors said they drove or rode with a driver after he or she used marijuana, while 15.8% said they drove or rode with someone after having five or more drinks. To view the complete ONDCP blog about youth drugged driving (which includes information about addressing drugged driving among youth), visit: [http://ofsubstance.gov/blogs/pushing\\_back/archive/2010/12/07/51746.aspx](http://ofsubstance.gov/blogs/pushing_back/archive/2010/12/07/51746.aspx).

## **Drugs drive a deadly road threat: authorities raise alarm as cases of impaired motorists grow**

*Houston Chronicle (September 13, 2010)*

With a growing number of drivers getting behind the wheel impaired by illegal and prescription drugs, law enforcement officials say cracking down on drugged driving must become a national priority. Drugged driving, though not new, has become more of a threat on roadways in recent years, officials said. Blood tests performed on drivers are detecting more traces of prescription drugs such as Xanax, Soma and hydrocodone — all substances that can adversely affect judgment, reaction time and motor skills. The tests also are increasingly detecting mixtures of prescription and illegal drugs taken with alcohol, which can exacerbate impairment. "Ten years ago we didn't have nearly the amount of drug-impaired cases as we have now," said Sgt. Susan Cotter, a drug recognition expert with the Harris County Sheriff's Office's traffic unit. The troubling trend comes as DWIs nationwide have declined, largely because of more than two decades of public education about the dangers of drinking and driving. It's time to put an equal emphasis on drugged driving, experts say.



The Office of National Drug Control Policy is calling for a reduction in accidents and fatalities over the next five years and for more education and research on how drugs affect the ability to drive. Visit: <http://www.chron.com/disp/story.mpl/chronicle/7197716.html>.

## **Understanding the Distracted Brain: Why Driving While Using Hands-Free Cell Phones is Risky**

*National Safety Council (NSC), March 2010*

To explain the limitations of the human brain as it pertains to multitasking, the National Safety Council has developed this white paper. The paper includes information on: the limitations of the brain; how multitasking impairs driving performance; the inability of the brain to capture driving cues when a person is multitasking; and why people do not realize they are, in fact, distracted when using a cell phone while driving. To view the white paper, visit: [http://www.nsc.org/safety/road/DistractedDriving/Documents/DstrctDrngWhitePaperFnl\(2\).pdf](http://www.nsc.org/safety/road/DistractedDriving/Documents/DstrctDrngWhitePaperFnl(2).pdf)

## **Dnt txt n drv**

*New York Times (April 24, 2010)*

At least 6,000 people were killed by distracted drivers in 2008, according to the National Highway Traffic Safety Administration, and the number is rising. A lot of good work already is happening to try to change this. President Obama signed an executive order banning texting while driving on federal business. Transportation Secretary Ray LaHood is pushing for tougher laws and more enforcement. States are passing laws, too. Local groups are gaining strength, spurred by too many deaths close to home. To view the complete article, visit the following website: <http://www.nytimes.com/2010/04/25/opinion/25winfrey.html>.

## **Your phone is locked. Just drive.**

*New York Times (April 28, 2010)*

The statistics on distracted driving are pretty scary. Just making cell phone calls increases your chances of crashing by four times; sending text messages increases the risk 23 times. We know this, we get this, but we keep doing it. About half of all teenagers admit to texting while driving, for example, no matter how many statistics and horror stories we pass along to them. If you're a concerned parent or employer, therefore, you may want to consider fighting technology with technology. There's a new category of cell phone apps made just for this purpose: text blockers like iZup, tXtBlocker, CellSafety and ZoomSafer. When your car is in motion, they lock up your phone so you can't text, call, e-mail or surf the Web. To view the complete article, visit the following: <http://www.nytimes.com/2010/04/29/technology/personaltech/29pogue.html?8dpc>.

## **Vroomer boomers: the age of motorcyclists is on the rise, and so is their rate of injuries and fatalities**

*Boston Globe (April 26, 2010)*

The highway signs are cropping up like dandelions on a spring lawn: "Look twice, save a life," and "Share the road with a motorcycle." While it may be hidden beneath their shades and helmets, many of the motorcyclists sharing those roads are increasingly likely to have gray hairs and wrinkles. As baby-boomer bikers have reconnected with their youth, the mean age of motorcycle ownership has risen — from 33.1 in 1998 to 40.2 in 2003, according to the Motorcycle Industry Council trade association. And the American Motorcyclist Association's latest data show the average age of its members is 48. It's not just the age of riders that is climbing. So, too, are their rates of injuries and fatalities. A new study from researchers at the University of Rochester Medical Center found that riders over 40 sustained more severe injuries and had longer hospital stays and higher risks of dying in motorcycle crashes than those under 40. To view the complete article, visit: [http://www.boston.com/news/health/articles/2010/04/26/the\\_age\\_of\\_motorcyclists\\_is\\_on\\_the\\_rise\\_and\\_so\\_is\\_their\\_rate\\_of\\_injuries\\_and\\_fatalities/](http://www.boston.com/news/health/articles/2010/04/26/the_age_of_motorcyclists_is_on_the_rise_and_so_is_their_rate_of_injuries_and_fatalities/).

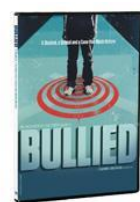
## **Does the pattern of injury in elderly pedestrian trauma mirror that of the younger pedestrian?**

*Journal of Surgical Research (2010)*

Walking is the primary mode of transportation for people aged 65 and over; pedestrian injuries are a substantial source of morbidity and mortality among elderly patients in the United States. This study was aimed at evaluating the pattern of injury in the elderly pedestrians and how it differs from younger patients. Retrospective analysis of the National Trauma Data Bank (2002-2006) was performed; injury prevalence was compared, and multivariate regression for mortality was conducted adjusting for demographic and injury characteristics for a total of 79,307 patients. Elderly patients were found to have higher rates of fractures and intracranial injuries with an extremely worse mortality after pedestrian trauma. For more information, visit the following website: [http://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle\\_229396\\_24](http://www.safetylit.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle_229396_24).

## **Intentional Injury**

### **Bullied: A Student, A School and a Case that Made History (Free Anti-Bullying Documentary)**



*Southern Poverty Law Center (SPLC)*

*Bullied* is a documentary film that chronicles one student's ordeal at the hands of anti-gay bullies and offers an inspiring message of hope to those fighting harassment today. It can become a cornerstone of anti-bullying efforts in middle and high schools. *Bullied* includes: a 40-minute documentary film (DVD), with closed captioning and with Spanish subtitles; two-part Viewer's

Guide with standards-aligned lesson plans and activities for use in staff development; and additional online materials. *Bullied* is designed to help administrators, teachers and counselors create a safer school environment for all students, not just those who are gay and lesbian. It is also intended to help all students understand the terrible toll bullying can take on its victims, and to encourage students to stand up for their classmates who are being harassed. *Bullied* has been endorsed by the National Education Association (NEA). For more information, and to receive a free copy of the DVD, visit: <http://www.tolerance.org/bullied>.

### **Highlights of the 2008 National Youth Gang Survey (Fact Sheet)** *Office of Juvenile Justice and Delinquency Prevention (OJJDP)*

This fact sheet, released by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), draws on findings from OJJDP's annual National Youth Gang Survey to provide data on gangs, gang members, and gang-related crime and violence. In 2008, approximately 774,000 gang members and 27,900 gangs were active in some 3,300 jurisdictions across the United States, estimates that remain virtually unchanged from 2007. To view the fact sheet, visit: <http://www.ncjrs.gov/pdffiles1/ojjdp/229249.pdf>.

### **It's world suicide prevention day: what you can do to help (suicide prevention resources)**

*Time (Friday, September 10, 2010)*

Every day 3,000 people end their own lives, and for every person who dies, there are 20 more people who unsuccessfully attempt a suicide, according to the World Health Organization (WHO). In the United States alone, that amounts to one death by suicide every 16 minutes, says the National Council for Suicide Prevention (NCSP). It's a bit tricky to figure out how to honor World Suicide Prevention Day and so the International Association for Suicide Prevention (IASP) and the WHO have collaborated on a list of activities for organizations to consider as a way to help support the cause. But what about individuals? The NCSP launched a "Take 5 to Save Lives" campaign that summarizes how we can all help prevent suicide — simple steps like learning the signs of suicidal behavior, raising awareness by telling other people about the World Suicide Prevention Day, and asking for help if you are concerned about your own thoughts and behavior. For more information, visit the following: [http://www.iasp.info/wspd/pdf/2010\\_wspd\\_activity\\_sheet.pdf](http://www.iasp.info/wspd/pdf/2010_wspd_activity_sheet.pdf) and <http://ncsponline.org/takefive.html>.

### **'We Can Help US': National Suicide Prevention Campaign for Teens** *Substance Abuse and Mental Health Services Administration (SAMHSA), April 2010*

The Substance Abuse and Mental Health Services Administration (SAMHSA), along with the Ad Council and the Inspire USA Foundation, launched a new teen suicide prevention national public service

announcement campaign. The campaign is the first teen suicide prevention effort from SAMHSA to employ a national mass media strategy and a robust digital outreach program. The public service announcement (PSA) campaign, We Can Help Us, is based on the insight that many teens encounter difficult issues, but many also develop positive solutions to help overcome them. The campaign includes TV, radio, and print advertising, as well as mall and in-school posters and viral videos. The ReachOut website (<http://us.reachout.com/index.php>) features: stories from teens; tips to help cope with tough times; and links to resources, including the National Suicide Prevention Lifeline, for teens who need immediate help. For more information, visit the following website: <http://multivu.prnewswire.com/mnr/adCouncil/43256/>.

## **Poisoning Safety**

### **Tobacco 'mints' tied to kids' poisoning** *MSNBC.com (April 19, 2010)*



Smokeless, flavored tobacco products that look like candy and come in packages shaped like cell phones may be contributing to accidental poisonings in very young children, new research suggests. Nicotine-laced pellets, strips and sticks that dissolve completely in the user's mouth — dubbed "tobacco candy" by critics — have joined chewing tobacco and snuff to become the second-most common cause of unintentional tobacco ingestion in kids younger than 6. Between 2006 and 2008, nearly 1,800 U.S. youngsters — almost 600 a year — accidentally consumed smokeless tobacco products, according to an analysis of 13,705 tobacco-related reports to the nation's poison control centers. That's a fraction of the nearly 3,600 poisonings a year that involved cigarettes and filter tips, but it worries authors of the new study published in the journal *Pediatrics*. To view: [http://www.msnbc.msn.com/id/36564107/ns/health-kids\\_and\\_parenting/](http://www.msnbc.msn.com/id/36564107/ns/health-kids_and_parenting/).

## **Home Safety**

### **Keeping Children with Special Needs Safe in the Home (Video Series)** *Safe Kids USA & the MetLife Foundation*

Safe Kids and the MetLife Foundation have partnered to develop a series of safety videos highlighting how you can take precautions in the home to help prevent injuries to children with physical, developmental or cognitive disabilities. To learn more, visit the following: <http://www.safekids.org/safety-basics/special-needs/>.



### **Safe and Healthy Homes: What Can Be Done? (Webinar Materials)** *Children's Safety Network (CSN), April 13, 2010*

This webinar, hosted by the Children's Safety Network National Injury and Violence Prevention Resource Center (CSN), described best practices in home safety, including



new programs, partners, and resources. A training program from the National Center for Healthy Housing was discussed as a tool for injury prevention. The featured speakers were Susan Aceti, Project Manager at the National Center for Healthy Housing and Angela Mickalide, Director of Education and Outreach at the Home Safety Council. For more information, visit the following website:

<http://www.childrenssafetynetwork.org/presentation/webinar.asp>.

## **Posters Highlight Household Poison Hazards** *American Association of Poison Control Centers (April 2010)*

The American Association of Poison Control Centers offers new posters on household hazards. The posters – which warn of the hazards associated with household cleansers, toiletries, alcohol, and medications – can be downloaded free of charge. The "Perfume, nail polish, hair products and toothpaste can all poison children" poster focuses on



American Association of  
Poison Control Centers

young children. For more information, visit:

<http://www.aapcc.org/dnn/PoisoningPrevention/OrderPoisonPreventionMaterials/tabid/408/Default.aspx>.

## **Danger underfoot: many hurt tripping over pets**

*MSNBC.com (April 16, 2010)*

Dogs and cats are a lurking household danger, according to a new report showing the pets cause all kinds of injuries related to falls. The pet trips — estimated at more than 80,000 a year — occurred while people were chasing after them, stepping over them, breaking up a Fido fight, and other scenarios. Dogs are the biggest hazard. Those injured noted various circumstances for their injuries, including: "tripped while crossing the street with their dog," "fainted while training her dog," and "walking dog and fell up steps," among other circumstances. To view: <http://www.msnbc.msn.com/id/36599635/ns/health-pet-health/>.

## **Data**

### **Availability and quality of cause-of-death data for estimating the global burden of injuries**

*Bulletin of the World Health Organization 2010; 88(11): 831-888C*

This journal articles aimed to assess the availability and quality of global death registration data used for estimating injury mortality. The completeness and coverage of recent national death registration data from the World Health Organization mortality database were assessed. The quality of data on a specific cause of injury death was judged high if fewer than 20% of deaths were attributed to any of several partially specified causes of injury, such as "unspecified unintentional injury." Recent death registration data were available for 83 countries, comprising 28% of the global population. They included most high-income

countries, most countries in Latin America and several in central Asia and the Caribbean. Categories commonly used for partially specified external causes of injury resulting in death included "undetermined intent," "unspecified mechanism of unintentional injury," "unspecified road injury" and "unspecified mechanism of homicide." Only 20 countries had high-quality death registration data that could be used for estimating injury mortality because injury deaths were frequently classified using imprecise partially specified categories. Analytical methods that can derive national estimates of injury mortality from alternative data sources are needed for countries without reliable death registration systems. For more information, visit the following website: <http://www.safetynet.org/citations/index.php?fuseaction=citations.viewdetails&citationIds%5B%5D=citjournalarticle22667612>.

### **Trends in childhood violence and abuse exposure: evidence from 2 national surveys** *Archives of Pediatrics and Adolescent Medicine (March 2010)*

This study declared a decline in reported bullying. The study found that the percentage of children who reported being physically bullied over the past year had declined significantly. The researchers compared two cross-sectional national telephone surveys conducted in 2003 and 2008 using identical questions. Experiences of children aged 2 to 17 years (2,030 children in 2003 and 4,046 children in 2008) were assessed through interviews with their caretakers and the children themselves. Several types of child victimization were reported significantly less often in 2008 than in 2003: physical assaults, sexual assaults, and peer and sibling victimizations, including physical bullying. However, the conclusions from this study do not represent a complete picture: the nation's children are still being mistreated, and in ways that are sometimes more hurtful and dangerous than physical bullying and intimidation. Electronic aggression through cyber-bullying, relational aggression – sometimes referred to as "mean girls" syndrome – rumors and gossip, and deliberate exclusion continue to occur in American schools. For more, visit: <http://www.childrenssafetynetwork.org/news/shownews.asp?newsID=1663>.

### **Injury and Traumatic Brain Injury-Related Death Rates, By Age Group – U.S., 2006**

*Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report (March 19, 2010)*

In 2006, nearly one third of all injury deaths involved traumatic brain injury (TBI). Overall, injury and TBI-related death rates varied across age groups. Peak injury and TBI-related mortality rates occurred among persons aged 20-24 years and among persons aged 75 years and older. To view the report, visit: [http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5910a9.htm?s\\_cid=mm5910a9\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5910a9.htm?s_cid=mm5910a9_e).

## A review of unintentional injuries in adolescents

*Annual Review of Public Health (March 2010)*

This CDC review confirms that unintentional injuries continue to be the largest source of premature morbidity and mortality and the leading cause of death among adolescents 10-19 years of age. Fatal injury rates of males are twice those of females, and racial disparities in injury are pronounced. Transportation is the largest source of these injuries, principally as drivers and passengers, but also as cyclists and pedestrians. Other major causes involve: drowning; poisonings; fires; sports and recreation; and work-related injuries. The frequency, severity, potential for death and disability, and costs of these injuries, together with the high success potential of prevention strategies, make injury prevention a key public health goal to improve adolescent health in the future. For more information, visit the following website: <http://www.childrensafetynetwork.org/news/shownews.asp?newsID=1666>.

## Other

### Announcing Injury Center's New Success Stories Portal

*National Center for Injury Prevention and Control*

The Injury Center has developed a new Success Stories Portal, which is an online tool and growing collection of real stories. It is written by injury professionals, and includes stories from around the world describing successful strategies and activities in injury and violence prevention and response. The portal also provides helpful guidance and templates for developing a story, enabling users to create a polished, professionally designed final product. Anyone can use the portal to create a story; however, those from funded partners will be included in an archive that can be searched and shared. Visit the portal at [www.cdc.gov/NCIPC-SuccessStory/](http://www.cdc.gov/NCIPC-SuccessStory/).

### Strengthening Care for the Injured, Success Stories and Lessons Learned from Around the World

*World Health Organization and Centers for Disease Control and Prevention*

The World Health Organization (WHO), with support from the Centers for Disease Control and Prevention (CDC) published this document consisting of case studies of innovative and significant work being conducted by prehospital, hospital-based, rehabilitation, and system-wide settings from countries in all regions of the world and at all socioeconomic levels. It emphasizes the increase in communication and the exchange of ideas among those working in the field of trauma care, whether in the pre-hospital setting, in acute care in hospitals, or in long-term rehabilitation. Supporting countries in planning and setting up trauma care programs enables them to strengthen their capacity to care for the injured. Through perseverance, detailed planning and organization, training opportunities, and a groundswell of commitment at the local, national, provincial or

institutional levels, this collaboration is leading to improvements across the globe. For more information: <http://apps.who.int/bookorders/anglais/detart1.jsp?sesslan=1&codlan=1&codcol=15&codcch=784>.

### Free Poster to Educate Young Athletes about Concussions (November 2010) National Football League & Centers for Disease Control and Prevention

The National Football League (NFL) and the Centers for Disease Control and Prevention (CDC) have created a free poster to educate young athletes about concussions. This new poster follows the release of a similar poster for NFL players and stresses the importance of: recognizing a concussion; taking time to recover; and not returning to play too soon. The NFL and CDC encourage every school and sports league to hang this poster in locker rooms and gymnasiums across the country. For more information, visit the following link: [http://www.cdc.gov/concussion/sports/nfl\\_poster.html](http://www.cdc.gov/concussion/sports/nfl_poster.html).



### The 'contagion' of social networks

*Los Angeles Times (September 13, 2010)*

The old folk concept that our personal health behaviors rub off on those around us has received a staggering amount of scientific support of late. Over the last few years, study after study has shown that weight gain, drug and alcohol use, even loneliness and depression aren't islands unto themselves but are powerfully contagious — capable of spreading within our social networks just as germs scatter after a sneeze. If your friends are smokers, you tend to light up too, studies show. If they're overweight, then your belt also feels a bit tight. If they're happy, chances are you're smiling too, and on and on. Many public health leaders now believe this growing science of social networks can be used to improve health and well-being on a broad, population-sized scale. Some see the approach as a promising new front against the day's most urgent health problems, such as obesity, smoking, and suicide. To view the complete article, visit: <http://www.latimes.com/health/la-he-social-networks-health-20100913,0,7197587.story>.

### The Development of Residential Fire H.E.L.P. Tool Kit: A Resource to Protect Homebound Older Adults Journal of Public Health Management and Practice (September/October 2010)

This article by Shane Diekman, PhD, MPH, behavioral scientist and Michele Huitric, MPH, health communication lead both in the Division of Unintentional Injury Prevention was published in the Journal of Public Health Management and Practice (September/October 2010 supplement issue). It describes the development of the Fire H.E.L.P. tool kit for training selected Meals On-Wheels (MOW) staff in Texas to implement a fire safety program for home-bound older adults. The tool kit consists of three parts: 1) instruction, 2) home assessment to determine a resident's smoke alarm needs, 3) and fire safety

education. During the tool kit's pilot, MOW participants showed increased fire safety knowledge and high levels of confidence about applying their new skills. Following the pilot, staff used the tool kit to conduct local training sessions, provide fire safety education, and to install smoke alarms in the homes of older adults. For more information, visit: [http://journals.lww.com/jphmp/Fulltext/2010/09001/The\\_Development\\_of\\_the\\_Residential\\_Fire\\_HELP.10.aspx](http://journals.lww.com/jphmp/Fulltext/2010/09001/The_Development_of_the_Residential_Fire_HELP.10.aspx).

## Calendar Check

Listed below are upcoming IP-related activities and calendar events. Use the links provided below to search using the title of the calendar event.



### December

#### Safe Toys and Gifts Month

[www.preventblindness.org](http://www.preventblindness.org)

### January

#### National Birth Defects Prevention Month

[www.nbdpn.org](http://www.nbdpn.org)

### February

#### National Burn Awareness Week (February 6-12, 2011)

<http://www.ameriburn.org/preventionNews.php>

#### National Child Passenger Safety Week (February 13-19, 2011)

<http://www.nhtsa.gov/>

### March

#### Brain Awareness Week (March 14-20, 2011)

[www.dana.org/brainweek](http://www.dana.org/brainweek)

#### National Poison Prevention Week (March 20-26, 2011)

[www.poisonprevention.org/poison.htm](http://www.poisonprevention.org/poison.htm)

#### National Native American HIV/AIDS Awareness Day (March 20, 2011)

[www.nnaapc.org/news/awareness-day.htm](http://www.nnaapc.org/news/awareness-day.htm)

## About this Newsletter

Initiated in 1997 to build the capacity of American Indian/Alaska Native Tribes and Tribal Organizations to address their injury problems, TIPCAP is in its fourth funding cycle. Staff and faculty from the University of North Carolina's Gillings School of Global Public Health produce this newsletter as part of a technical assistance contract to support TIPCAP.

The following 40 Tribes/Tribal Organizations are currently funded for 2010-2015 TIPCAP funding cycle: 1) **Part IA-New** (n=16); 2) **Part IB-Continuing** (n=17); and 3) **Part II-projects** (n=7):

### Part 1A (New) – 5 Year Projects

1. Great Plains Tribal Chairman's Health Board, SD
2. Oglala Tribe, SD
3. Maniilaq Association, AK
4. Tanana Chiefs Conference, AK
5. Ho-Chunk, WI
6. Menominee Indian Tribe of Wisconsin
7. Tule River Indian Tribe, CA
8. Tuba City Regional Health Facility, AZ
9. Absentee Shawnee Tribe, OK
10. Colorado River Indian Tribe, AZ
11. Gila River Indian Community, AZ
12. Hualapai Tribe, AZ
13. Reno Sparks Indian Colony, NV
14. San Carlos Apache Tribe, AZ
15. NorthWest Washington Area Indian Health Board, WA
16. Northwest Portland Area Indian Health Board, OR

### Part 1B (Previously Funded) – 5 Year Projects

1. Sisseton-Wahpeton Oyate, SD
2. SouthEast Alaska Regional Health Consortium, AK
3. Norton Sound Health Corp., AK
4. Bristol Bay Area Health Corp., AK
5. Pueblo of San Felipe, NM
6. Pueblo of Jemez, NM
7. Fond Du Lac Reservation, MN
8. Bad River, WI
9. Oneida Tribe of Indians of Wisconsin
10. Indian Health Council Inc., CA
11. California Rural Indian Health Board
12. Hardrock Council on Substance Abuse Prevention, AZ
13. Navajo Nation, AZ
14. Kaw Nation, OK
15. Kiowa, OK
16. Choctaw Nation, OK
17. Quechan, AZ/CA

### Part II – 3 Year Projects

1. Southern Ute, CO
2. Stockbridge-Munsee Community, WI
3. Greenville Rancheria, CA
4. St Regis Mohawk, NY
5. Chitimacha Tribe of Louisiana, LA
6. Walker River Paiute Tribe, AZ
7. Ak-Chin Indian Community, AZ

For questions, newsletter, submissions, and/or technical assistance, please contact **Nancy Bill**, MPH, CHES; 301-443-0105 or [nancy.bill@ihs.gov](mailto:nancy.bill@ihs.gov).



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Advocacy, Outreach and Results